

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Malone

Art Unit: 2873

Serial No.: 10/036,696

Examiner: Thomas, Brandi N.

Filed: 31 December 2001


Docket No. TI-29278

For: LAMINATED PACKAGE

**NOTICE OF APPEAL FROM THE PRIMARY EXAMINER TO
THE BOARD OF PATENT APPEALS AND INTERFERENCES**

20 September 2004

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

MAILING CERTIFICATE UNDER 37 C.F.R. § 1.5(A)	
I hereby certify that the above correspondence is being deposited with the U.S. Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia, 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office, on the date shown below.	
	20 Sept 2004
Charles A. Brill	Date

Dear Sir:

Applicants hereby appeal to the Board of Appeals from the decision dated 20 May 2004 of the Primary Examiner finally rejecting Claims 1-3, 5-7, and 16-21.

Please charge the fee of \$330.00 to the deposit account of Texas Instruments Incorporated, Deposit Account No. 20-0668.

The Commissioner of Patents is hereby authorized to charge any fees that may be required, or credit any overpayment to the deposit account of Texas Instruments Incorporated, Deposit Account No. 20-0668.

This form is submitted in triplicate.

Respectfully submitted,

Charles A. Brill
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PO Box 655474 M/S 3999
Dallas, TX 75265
(972) 917-4379
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10/12/2004 GSTANLEY 00000001 200668 10036696

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10036696

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	36	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	36 minus 20 =	* 16
INDEPENDENT CLAIMS	7 minus 3 =	* 4
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

8/29/04

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 35	Minus ** 36	=
Independent	* 7	Minus *** 7	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 - *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	370.00
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	FEE
BASIC FEE	740.00
X\$18=	
X84=	
+280=	
TOTAL	

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

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